

228738

AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE: ☐ IXC ☒ CLEC ☐ ILEC ☐ Wireless

2011-29A

CERTIFICATED COMPANY INFORMATION

BRUDELS COMMUNICATIONS, LLC

Company Name

FEIN/SSN

225-293-3332

Db/a/fka

Telephone #

549 KENILWORTH PARKWAY

Mailing Address

BATON ROUGE, LA 70808

City, State, Zip Code

4315 BLUEBONNET BLVD, SUITE A

Business Location

BATON ROUGE, LA 70809

East Baton Rouge

City, State, Zip Code

County

REGISTERED AGENT INFORMATION

Registered Agent: John Brydels

Mailing Address: 549 Kenilworth Pkwy

City, State, Zip Code: Baton Rouge, LA 70808

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

A. JOHN H. BRUDELS JR.
General Manager (Include address if different than above.)
225-293-3332 / 225-293-3335 / brydels@everycall.com
Telephone Number Facsimile Number E-mail Address

B. SAME
Customer Relations /Complaints Representative (Include address if different than above.)
/ /
Telephone Number Facsimile Number E-mail Address

C1. SAME
Customer Relations/Complaints Representative for Escalated Complaints (Include address if different than above.)
/ /
Telephone Number Facsimile Number E-mail Address

C2. NO TOLL FREE NUMBER
Customer Contact (Toll Free Number)

D. SAME
Engineering Operations (Include address if different than above.)
/ /
Telephone Number Facsimile Number E-mail Address

E. SAME
Test and Repair (Include address if different than above.)
/ /
Telephone Number Facsimile Number E-mail Address

F. SAME
Emergencies (During non-office hours)

Telephone Number / Facsimile Number / E-mail Address

In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:

G. SAME
Regulatory Officer (Include address if different than above.)

Telephone Number / Facsimile Number / E-mail Address

H. SAME
Dual Party Mailings (Name)

Mailing Address

Telephone Number / Facsimile Number / E-mail Address

I. SAME
Interim LEC Fund Mailings (Name)

Mailing Address

Telephone Number / Facsimile Number / E-mail Address

J. SAME
Universal Service Fund Mailings (Name)

Mailing Address

Telephone Number / Facsimile Number / E-mail Address

K. SAME
Gross Receipts Mailings (Name)

Mailing Address

Telephone Number / Facsimile Number / E-mail Address

L. SAME
Lifeline Mailings (Name)

Mailing Address

Telephone Number / Facsimile Number / E-mail Address

JOHN H. BRUYDELS, JR.
This form was completed by (print name)
PRESIDENT
Title

[Signature]
Signature
3/15/11
Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC
Clerk's Office
Post Office Drawer 11649
Columbia, South Carolina 29211

Office of Regulatory Staff
Attn: Jeanne Gordon
1401 Main Street, Suite 900
Columbia, South Carolina 29201

(Rev. PSC 11/2010)